

Stonestreet One, Inc. - Offering of up to 500,000 Units

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR

OMB APPROVAL OMB Number: 3235-0076

Expires: May 31, 2005 Estimated average burden Hours per response. . . 1

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Prefix

Serial

1126494

Date Received

	Section 4(6) ☐ ULOE	
Type of Filing: ☐ New Filing ☐ Amendment		(15 d) () \$ d (() 1 ()) \$ d () d () 2 ()
A. BASIC IDENTIFICATI	ON DATA	
1. Enter the information requested about the issuer		05085293
Name of Issuer (check if this is an amendment and name has char Stonestreet One, Inc.	nged, and indicate change.)	
Address of Executive Offices (Number and Street, City, State, Zip Code) 322 West Main Street, Louisville, KY 40202	Telephone Number (Including A (502) 595-7000	Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices) Same as above	Telephone Number (Including A	Area Code)
Brief Description of Business The company designs, develops and integrates embedded software and	d wireless data applications.	SEPRE
Type of Business Organization E corporation □ limited partnership, already formed □ business trust □ limited partnership, to be formed	□ other (please s	pecify): THOMSON FINANCIAI
Month Actual or Estimated Date of Incorporation or Organization: June Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Ser CN for Canada; FN for other for		Estimated KY
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemptio et seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securit and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at on which it is due, on the date it was mailed by United States registered or certified ma Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Wa Copies Required: Five (5) copies of this notice must be filed with the SEC, one of whi photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendmenthereto, the information requested in Part C, and any material changes from the information be filed with the SEC. Filing Fee: There is no federal filing fee. State:	ties in the offering. A notice is detented the address given below or, if recuil to that address. ashington, D.C. 20549 ich must be manually signed. Any ments need only report the name of	emed filed with the U.S. Securities beived at that address after the date of copies not manually signed must be the issuer and offering, any changes

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

must be completed.

SEC 1972(2-99)



ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice

will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and

		A. B	ASIC IDENTIFICA	TION DATA	k			
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 								
• Each general	and managing	partner of partnership	issuers.		•			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner			
Full Name (Last name firs Smith, Richard		1)						
Business or Residence Ad 322 West Mai		er and Street, City, Statisville, KY 40202	ate, Zip Code)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner			
Full Name (Last name firs Reilly, Timoth		1)						
Business or Residence Ac 322 West Mai		er and Street, City, Statisville, KY 40202	ate, Zip Code)	,				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner			
Full Name (Last name fire McChesney, T		1)						
Business or Residence Ac 1928 NE 26 th		er and Street, City, Stand, OR 97212	ate, Zip Code)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name fir Lange, Damor		ıl)						
Business or Residence Ac 322 West Ma		per and Street, City, St uisville, KY 40202	ate, Zip Code)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner			
Full Name (Last name fir Manry, John I		ai)						
Business or Residence A 17529 Paradi		per and Street, City, Sort, Cornelius, NC 2						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner			
Full Name (Last name Stich, John M		ridual)						
Business or Residence 5819 Edinbur		fumber and Street, Callas, TX 75252	City, State, Zip Code)					
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name Su, Ambrose		vidual)		£ ,				
Business or Residence P.O. Box 170		Tumber and Street, C 8 97709-1706	City, State, Zip Code)					
***	(U	se blank sheet, or co	ppy and use additiona	l copies of this	s sheet, as necessary.)			

						INFORM								
l. Has	the issuer	sold, or d	oes the iss	uer intend	to sell, to	non-accre	dited inve	stors in th	is offering	ξ?			Yes No	
			1	Ancwer	also in A	nnendiv (Olumn 2	if filing ur	ider III O	F			(L) (E)	
. Wha	s the offer	nimum in ing permit	vestment t joint own	that will be nership of	e accepted a single ur	from any	individual			• • • • • • • • • • • • • • • • • • • •		•••••	\$75,000 sub Yes No	ject to waiv
soli dea	citation of ler register	purchasered with the	rs in connote SEC an	ection with	n sales of s a state or s	securities i states, list t	n the offer he name o	ring. If a pof the brok	erson to l er or deal	oe listed is er. If mor	an associ	ated persor	or similar ren or agent of a ns to be listed a	broker or
ull Na	me (Last r	name first,	if individ	ual)										
	Viewp	oint Secu	rities LL	C										
3usine:				nber and S	treet, City	, State, Zi	p Code)							
	1001B	SW Dist	c Drive. S	Suite 104.	Bend. O	R 97702								
Name of	f Associated			<u> </u>	20110, 0	1,77,02								
States i (Che	n Which F ck "All St	erson Listates" or cl	ted Has So neck indiv	olicited or idual state	Intends to s)	Solicit Pu	ırchasers		.,				□ All State	es *
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[wi]	[WY]	[PR]		
Full Na	me (Last i	name first,	if individ	lual)										
Rusine	es or Design	lence Add	tess (Nur	nber and S	treat City	State 7i	n Code)					·		
Dusine	ss of Resid	ichec Aud	1035 (1401	noci anu c	nicci, City	, State, Zi	p Code)							
Name o	f Associated	Broker or	Dealer										10-10-10-10-10-10-10-10-10-10-10-10-10-1	
				olicited or idual state									□ All State	 es
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]		[MA]			[MS]	[MO]		
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full Na	ame (Last:	name first	, if individ	lual)			····							
					·							,_		
Busine	ss or Resid	dence Add	lress (Nur	mber and S	Street, City	y, State, Zi	p Code)							
Name o	f Associate	d Broker or	Dealer											
				olicited or									□ All State	es
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT]	[NE]	[NV]	[NH]	[NJ] TX	[NM]	[NY] [VT]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C	OFFERING PRICE	NUMBER	OF INVESTORS	EXPENSES A	AND USE OF PROCEEDS
U .	OFFERING FRICE	. IXUIVIDEA	OF INVESTORS	. DAEDHODO 2	AND USE OF TROCEEDS

1.	Enter the aggregate offering price of securities included in this offering If the transaction is an exchange offering, check this box \(\Pi\) and indicate and already exchanged.			
	Type of Security		Aggregate Offering Pr	
	Debt		\$0_	\$ <u>0</u>
	Equity*		\$1,500,000	\$ 1,059,000
		to see the second		
	Convertible Securities (including warrants)		\$ <u>0</u>	\$ <u>0</u> _
	Partnership Interests		\$ <u> 0 </u>	\$ <u>0</u>
	Other (Specify Limited Liability Company Interests)		\$0	<u> </u>
	Total		\$ 1,500,000	\$_1,059,000
	Answer also in Appendix, Column 3, if filing under ULG	DE.		
2.	Enter the number of accredited and non-accredited investors whamounts of their purchases. For offerings under Rule 504, indicaggregate dollar amount of their purchases on the total lines. E	cate the number of	f persons who hav	e purchased securities and the
	Accredited Investors		10	\$ <u>1,059,000</u>
	Non-accredited Investors		0	\$0
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing und	er ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the inform types indicated, in the twelve (12) months prior to the first sale of second			
	Type of offering		Type of Security	Dollar Amount Sold
	Rule 505	•••••		\$
	Regulation A			\$
	Rule 504			
	Total			<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance solely to organization expenses of the issuer. The information may be not known, furnish an estimate and check the box to the left of the estimate.	e given as subject to		
4.	solely to organization expenses of the issuer. The information may b	e given as subject to timate.	o future contingenci	
4.	solely to organization expenses of the issuer. The information may be not known, furnish an estimate and check the box to the left of the estimate and check the left of the estimate and check the left of th	e given as subject to timate.	o future contingenci	es. If the amount of an expenditure
4.	solely to organization expenses of the issuer. The information may be not known, furnish an estimate and check the box to the left of the estransfer Agent's Fees	e given as subject to	o future contingenci	es. If the amount of an expenditure
4.	solely to organization expenses of the issuer. The information may be not known, furnish an estimate and check the box to the left of the estransfer Agent's Fees. Printing and Engraving Costs.	e given as subject to timate.	o future contingenci	es. If the amount of an expenditure □ \$ 図 \$
4.	solely to organization expenses of the issuer. The information may be not known, furnish an estimate and check the box to the left of the estransfer Agent's Fees. Printing and Engraving Costs. Legal Fees.	e given as subject to	o future contingenci	es. If the amount of an expenditure □ \$ ⊠ \$ ★ \$
4.	solely to organization expenses of the issuer. The information may be not known, furnish an estimate and check the box to the left of the estransfer Agent's Fees. Printing and Engraving Costs. Legal Fees. Accounting Fees.	e given as subject to	o future contingenci	es. If the amount of an expenditure □ \$ ⊠ \$
4.	solely to organization expenses of the issuer. The information may be not known, furnish an estimate and check the box to the left of the estransfer Agent's Fees. Printing and Engraving Costs. Legal Fees. Accounting Fees. Engineering Fees.	e given as subject to	o future contingenci	es. If the amount of an expenditure □ \$ ⊠ \$

** In addition to the cash sales commission identified above, Viewpoint Securities LLC will receive warrants to purchase a number of shares of Common

Stock equal to 10% of the number of Units sold.

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	Part C - Question 1 and	veen the aggregate offering price given in respon- total expenses furnished in response to Part C – rence is the "adjusted gross proceeds to the issue		\$ 1,340,200
	for any purpose is not known, furr	adjusted gross proceeds to the issuer used or propish an estimate and check the box to the left of the set forth in response to Part $C-Q$ uestion 4.b	ne estimate. The total of the payr	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🗆 \$	□ \$
	Purchase of real estate		🗆 \$	□ \$
	Purchase, rental or leasing and ins	stallation of machinery and equipment	🗅 \$	\$
	Construction or leasing of plant b	uildings and facilities	🗆 \$	□ \$
	offering that may be used in excha	ncluding the value of securities involved in this ange for the assets or securities of another	🗆 \$	□ \$
	Repayment of indebtedness		🗆 \$	□ \$
	Working capital		🗆 \$	S \$ 1,340,200
	Other (specify):		□ \$	□ \$
			- \$	□ \$
				E \$ 1,340,200
	Total Payments Listed (column to	otals added)		
	·	,		
		D. FEDERAL SIGNATUR	RE	***
_				
onst	itutes an undertaking by the issuer to t	signed by the undersigned duly authorized personants to the U.S. Securities and Exchange Combod investor pursuant to paragraph (b)(2) of Rule 5	mission, upon written request of	
ssue	r (Print or Type)	Signature	Date	<u></u>
ton	estreet One, Inc.	Bickard W Sm	August 24, 2005	
T	e of Signer (Print or Type)	Title of Signer (Print or Type)	any i	

	E. STATE SIGNATURE								
1.	1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions Of such rule? See Appendix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes CFR 239.500) at such times as required by	to furnish to any state administrator of any state in which this notice is filed state law.	, a notice on Forn	n D (17					
3.	The undersigned issuer hereby undertakes offerees.	to furnish to the state administrators, upon written request, information furn	ished by the issue	er to					
4.		issuer is familiar with the conditions that must be satisfied to be entitled to his notice is filed and understands that the issuer claiming the availability of as have been satisfied.							
	uer has read this notification and knows the ceed person.	contents to be true and has duly caused this notice to be signed on its behalf	by the undersigne	d duly					
Issuer (Print or Type)	Signature Date							
Stonest	reet One, Inc.	Richard W Smith August 24, 2005							
Name	(Print or Type)	Title (Print or Type)							
Richard	W. Smith	President							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy of bear typed or printed signatures.

APPENDIX

1	Intend to sell to non- accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Туре с	of investor and a	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL_									
AK									
AZ									
AR									
CA									
СО						'			
СТ									
DE									
DC									
FL									
GA									
НІ									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО									

APPENDIX

1			1 3			4			
1	Intend to accredited	sell to non- investors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	investor and ar	mount purchased	in State	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV					·				
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК			**	10					
OR		X		10	1,059,000	0	0		Х
PA									
RI									
SC									
SD									
TN		_							
TX									
UT		_							
VT									
VA				 					
WA		-							
WV				,	-				
WI		_							
WY	1								
PR **500 (On Unite consis	ting of one share	of Common Stock and a wa	arrant to nurchase	one share of Com	mon Stock at a n	rice of \$3.00 par u	nit	

^{**500,000} Units consisting of one share of Common Stock and a warrant to purchase one share of Common Stock, at a price of \$3.00 per unit.

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